

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000099314

Entity Name: MAYFAIR HOLDINGS, INC.

FILED
Mar 22, 2009
Secretary of State

Current Principal Place of Business:

1433 HOLLY GLEN RUN
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

1433 HOLLY GLEN RUN
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3678753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMPSON, MAURICE A
1433 HOLLY GLEN RUN
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: KHOURY, TED
Address: 11420 ARBORSIDE BEND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: CEO () Delete
Name: SIMPSON, MAURICE
Address: 1433 HOLLY GLEN RUN
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: SIMPSON, SHELDON
Address: 1433 HOLLY GLEN RUN
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: GEAGEA, JOE
Address: 7719 TWIN PINES
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: KHOURY, TED
Address: 11420 ARBORSIDE BEND WAY
City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SIMPSON, SHELDON
Address: 1433 HOLLY GLEN RUN
City-St-Zip: APOPKA, FL 32703

Title: D (X) Change () Addition
Name: GEAGEA, JOE
Address: 7719 TWIN PINES
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHELDON SIMPSON

T

03/22/2009

Electronic Signature of Signing Officer or Director

Date